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Producer Completion Guidelines for Standardized Health Forms (SHF)

The State of New Hampshire Standardized Health Form (SHF) is a two page form which is required for all new enrollees/members with an effective date of coverage on or after January 1, 2006.

The Producer Completion Guidelines were created to offer assistance to Producers who will be guiding their clients through this new enrollment process. In order for a SHF to be deemed complete by a health insurance carrier, and to avoid any delays in a group's enrollment process, each section must contain the following information:

Section 1 must be filled out completely with the exception of Policy/Group Number for new business.

Section 2 must list each family member to be covered, their date of birth, sex, height, weight and an indication (yes or no) if disabled.

Section 3 must indicate the type of coverage requested and a preferred place to be contacted during the day. A minimum of one phone number must be provided which matches the preferred place to be contacted (work or home).

Section 4, A must include a Yes or No indication for each of the numbered conditions listed as well as the questions in Section 4, B and C.

Section 5 must include corresponding detail for each of the conditions checked "Yes" in Section 4, A, B and C. The treating physician's phone number may be omitted if not known by the enrollee.

Section 6 must include the employee's name, signature and date. If the employee is covering a spouse, the spouse's name, signature and date must also be completed.